

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 120 / 258

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. Medical Technology Fund

A.

Full Name (Last, First, Middle Initial)

Stephen H Mahle

Mailing Address 710 Medtronic Parkway

City

Minneapolis

State

MN

Zip Code

55432

FEC ID number of contributing
federal political committee.

C

Name of Employer
Medtronic Inc.

Occupation

EVP of Healthcare Policy & Reg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 6 / 2 0 0 9

Transaction ID: A2009-2800421

Amount of Each Receipt this Period

192.00

B.

Full Name (Last, First, Middle Initial)

Stephen H Mahle

Mailing Address 710 Medtronic Parkway

City

Minneapolis

State

MN

Zip Code

55432

FEC ID number of contributing
federal political committee.

C

Name of Employer
Medtronic Inc.

Occupation

EVP of Healthcare Policy & Reg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 0 / 2 0 0 9

Transaction ID: A2009-2800929

Amount of Each Receipt this Period

192.00

C.

Full Name (Last, First, Middle Initial)

Stephen H Mahle

Mailing Address 710 Medtronic Parkway

City

Minneapolis

State

MN

Zip Code

55432

FEC ID number of contributing
federal political committee.

C

Name of Employer
Medtronic Inc.

Occupation

EVP of Healthcare Policy & Reg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1152.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 3 / 2 0 0 9

Transaction ID: A2009-3293784

Amount of Each Receipt this Period

192.00

SUBTOTAL of Receipts This Page (optional)

576.00

TOTAL This Period (last page this line number only)